

DAMAGE SURVEY REPORT (DSR)
Emergency Watershed Protection Program – Recovery

Section 1A

Date of Report: 11/30/2005

DSR Number: 103-05-058K Project Number: Black River

NRCS Entry Only

Eligible: YES ☒ NO ☐
Approved: YES ☒ NO ☐
Funding Priority Number (from Section 4) 10
Limited Resource Area: YES ☐ NO ☒

Section 1B Sponsor Information

Sponsor Name: St. Tammany Parish

Address: P.O. Box 628

City/State/Zip: Covington, LA 70434

Telephone Number: (985) 898-2552

Fax: (985) 898-5205

Section 1C Site Location Information

County: St. Tammany State: LA Congressional District: 01

Latitude: see comments Longitude: see comments Section: 37 Township: 7S Range: 10E

UTM Coordinates: 16

Drainage Name: Black River Reach # 1 Reach: 8,800 Feet

Damage Description: Debris is reducing the capacity of Channel. Drainage is severely impeded. Debris consists mostly trees.

Section 1D Site Evaluation

All answers in this Section must be YES in order to be eligible for EWP assistance.

Site Eligibility	YES	NO	Remarks
Damage was a result of a natural disaster?*	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Hurricane Katrina - August 29, 2005
Recovery measures would be for runoff retardation or soil erosion prevention?*	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Threat to life and/or property?*	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Event caused a sudden impairment in the watershed?*	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Imminent threat was created by this event?***	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
For structural repairs, not repaired twice within ten years?***	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Site Defensibility			
Economic, environmental, and social documentation adequate to warrant action (Go to pages 3, 4, 5 and 6 ***)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Proposed action technically viable? (Go to Page 9 ***)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

Have all the appropriate steps been taken to ensure that all segments of the affected population have been informed of the EWP program and its possible effects? YES ☒ NO ☐

Comments: start: 30.41970, 90.19110
end : 30.43180, 90.19580

* Statutory

** Regulation

*** DSR Pages 3 through 5 are required to support the decisions recorded on this summary page. If additional space is needed on this or any other page in this form, add appropriate pages.

DSR NO: 103-05-058K

Section 1E Proposed Action

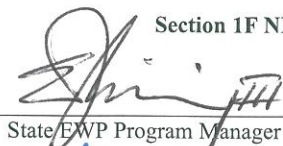
Describe the preferred alternative from Findings: Section 5 A:

Removal of storm debris from channel using conventional methods involving sawyers, cable equipment and Trackhoes.

Total installation cost identified in this DSR: Section 3: \$ 76,600.00

Section 1F NRCS State Office Review and Approval

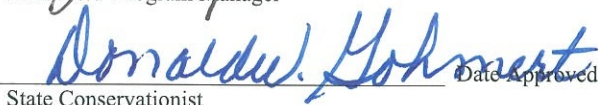
Reviewed By:


State EWP Program Manager

Date Reviewed:

12/20/05

Approved By:


State Conservationist

Date Approved:

12/20/05

PRIVACY ACT AND PUBLIC BURDEN STATEMENT

NOTE: The following statement is made in accordance with the Privacy Act of 1974, (5 U.S.C. 552a) and the Paperwork Reduction Act of 1995, as amended. The authority for requesting the following information is 7 CFR 624 (EWP) and Section 216 of the Flood Control Act of 1950, Public Law 81-516, 33 U.S.C. 701b-1; and Section 403 of the Agricultural Credit Act of 1978, Public Law 95334, as amended by Section 382, of the Federal Agriculture Improvement and Reform Act of 1996, Public Law 104-127, 16 U.S.C. 2203. EWP, through local sponsors, provides emergency measures for runoff retardation and erosion control to areas where a sudden impairment of a watershed threatens life or property. The Secretary of Agriculture has delegated the administration of EWP to the Chief or NRCS on state, tribal and private lands.

Signing this form indicates the sponsor concurs and agrees to provide the regional cost-share to implement the EWP recovery measure(s) determined eligible by NRCS under the terms and conditions of the program authority. Failure to provide a signature will result in the applicant being unable to apply for or receive a grant the applicable program authorities. Once signed by the sponsor, this information may not be provided to other agencies. IRS, Department of Justice, or other State or Federal Law Enforcement agencies, and in response to a court or administrative tribunal.

The provisions of criminal and civil fraud statutes, including 18 U.S.C. 286, 287, 371, 641, 651, 1001; 15 U.S.C. 714m; and 31 U.S.C. 3729 may also be applicable to the information provided. According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0578-0030. The time required to complete this information collection is estimated to average 117/1.96 minutes/hours per response, including the time for reviewing instructions, searching existing data sources, field reviews, gathering, designing, and maintaining the data needed, and completing and reviewing the collection information.

USDA NONDISCRIMINATION STATEMENT

"The U.S. Department of Agriculture (USDA) prohibits discrimination in all its programs and activities on the basis of race, color, national origin, age, disability, and where applicable, sex, marital status, familial status, parental status, religion, sexual orientation, genetic information, political beliefs, reprisal, or because all or part of an individual's income is derived from any public assistance program. (Not all prohibited bases apply to all programs.) Persons with disabilities who require alternative means for communication of program information (Braille, large print, audiotope, etc.) should contact USDA's TARGET Center at (202)720-2600 (voice and TDD). To file a complaint of discrimination, write to USDA, Director, Office of Civil Rights, 1400 Independence Avenue, SW., Washington, DC 20250-9410, or call (800)795-3272 (voice) or (202) 720-6382 (TDD). USDA is an equal opportunity provider and employer.

Civil Rights Statement of Assurance

The program or activities conducted under this agreement will be in compliance with the nondiscrimination provisions contained in the Titles VI and VII of the Civil Rights Act of 1964, as amended; the Civil Rights Restoration Act of 1987 (Public Law 100-259); and other nondiscrimination statutes: namely, Section 504 of the Rehabilitation Act of 1973, Title IX of the Amendments of 1972, the Age Discrimination Act of 1975, and the Americans with Disabilities Act of 1990. They will also be in accordance with regulations of the Secretary of Agriculture (7 CFR 15, 15a, and 15b), which provide that no person in the United States shall on the grounds of race, color, national origin, gender, religion, age or disability, be excluded from participation in, be denied the benefits of, or otherwise subjected to discrimination under any program or activity receiving Federal financial assistance from the U.S. Department of Agriculture or any agency thereof.

DAMAGE SURVEY REPORT (DSR)
Emergency Watershed Protection Program – Recovery

Section 1A

Date of Report: _____

DSR Number: _____ Project Number: _____

NRCS Entry Only

Eligible: YES _____ NO _____
Approved: YES _____ NO _____
Funding Priority Number (from Section 4) _____
Limited Resource Area: YES _____ NO _____

Section 1B Sponsor Information

Sponsor Name: _____

Address: _____

City/State/Zip: _____

Telephone Number: _____ Fax: _____

Section 1C Site Location Information

County: _____ State: _____ Congressional District: _____

Latitude: _____ Longitude: _____ Section: _____ Township: _____ Range: _____

UTM Coordinates: _____

Drainage Name: _____ Reach: _____

Damage Description: _____

Section 1D Site Evaluation

All answers in this Section must be YES in order to be eligible for EWP assistance.

Site Eligibility	YES	NO	Remarks
Damage was a result of a natural disaster?*			
Recovery measures would be for runoff retardation or soil erosion prevention?*			
Threat to life and/or property?*			
Event caused a sudden impairment in the watershed?*			
Imminent threat was created by this event?***			
For structural repairs, not repaired twice within ten years?***			
Site Defensibility			
Economic, environmental, and social documentation adequate to warrant action (Go to pages 3, 4, 5 and 6 ***)			
Proposed action technically viable? (Go to Page 9 ***)			

Have all the appropriate steps been taken to ensure that all segments of the affected population have been informed of the EWP program and its possible effects? YES _____ NO _____

Comments: _____

* Statutory

** Regulation

*** DSR Pages 3 through 5 are required to support the decisions recorded on this summary page. If additional space is needed on this or any other page in this form, add appropriate pages.

DSR NO: _____

Section 1E Proposed Action

Describe the preferred alternative from Findings: Section 5 A:

Total installation cost identified in this DSR: Section 3: \$ _____

Section 1F NRCS State Office Review and Approval

Reviewed By: _____ Date Reviewed: _____
State EWP Program Manager

Approved By: _____ Date Approved: _____
State Conservationist

PRIVACY ACT AND PUBLIC BURDEN STATEMENT

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Signing this form indicates the sponsor concurs and agrees to provide the regional cost-share to implement the EWP recovery measure(s) determined eligible by NRCS under the terms and conditions of the program authority. Failure to provide a signature will result in the applicant being unable to apply for or receive a grant the applicable program authorities. Once signed by the sponsor, this information may not be provided to other agencies. IRS, Department of Justice, or other State or Federal Law Enforcement agencies, and in response to a court or administrative tribunal.

The provisions of criminal and civil fraud statutes, including 18 U.S.C. 286, 287, 371, 641, 651, 1001; 15 U.S.C. 714m; and 31 U.S.C. 3729 may also be applicable to the information provided. According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0578-0030. The time required to complete this information collection is estimated to average 117/1.96 minutes/hours per response, including the time for reviewing instructions, searching existing data sources, field reviews, gathering, designing, and maintaining the data needed, and completing and reviewing the collection information.

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Section 2 Environmental Evaluation

2A Resource Concerns	2B Existing Condition	2C Alternative Designation			
		Proposed Action	No Action	Alternative	
		2D Effects of Alternatives			
Soil					
Water					
Downstream water rights					
Air					
Plant					
Animal					
Other					

DSR NO: _____

Section 2E Special Environmental Concerns

Resource Consideration	Existing Condition	Alternatives and Effects		
		Proposed Action	No Action	Alternative
Clean Water Act Waters of the U.S.				
Coastal Zone Management Areas				
Coral Reefs				
Cultural Resources				
Endangered and Threatened Species				
Environmental Justice				
Essential Fish Habitat				
Fish and Wildlife Coordination				
Floodplain Management				
Invasive Species				
Migratory Birds				
Natural Areas				
Prime and Unique Farmlands				
Riparian Areas				
Scenic Beauty				
Wetlands				
Wild and Scenic Rivers				

Completed By: _____

Date: _____

DSR NO: _____

Section 2F Economic

This section must be completed by each alternative considered (attach additional sheets as necessary).

	Future Damages (\$)	Damage Factor (%)	Near Term Damage Reduction
Properties Protected (Private)			
9 Homes @ \$180,000/home			
Properties Protected (Public)			
Business Losses			
Other			
Total Near Term Damage Reduction \$			
Net Benefit (Total Near Term Damage Reduction minus Cost from Section 3)			

Completed By: _____ Date: _____

Section 2G Social Consideration This section must be completed by each alternative considered

(attach additional sheets as necessary).

	YES	NO	Remarks
Has there been a loss of life as a result of the watershed impairment?			
Is there the potential for loss of life due to damages from the watershed impairment?			
Has access to a hospital or medical facility been impaired by watershed impairment?			
Has the community as a whole been adversely impacted by the watershed impairment (life and property ceases to operate in a normal capacity)			
Is there a lack or has there been a reduction of public safety due to watershed impairment?			

Completed By: _____ Date: _____

DSR NO: _____

Section 2H Group Representation and Disability Information

This section is completed only for the preferred alternative selected.

Group Representation	Number
American Indian/Alaska Native Female Hispanic	
American Indian/Alaska Native Female Non-Hispanic	
American Indian/Alaska Native Male Hispanic	
American Indian/Alaska Native Male Non-Hispanic	
Asian Female Hispanic	
Asian Female Non-Hispanic	
Asian Male Hispanic	
Asian Male Non-Hispanic	
Black or African American Female Hispanic	
Black or African American Female Non-Hispanic	
Black or African American Male Hispanic	
Black or African American Male Non-Hispanic	
Hawaiian Native/Pacific Islander Female Hispanic	
Hawaiian Native/Pacific Islander Female Non-Hispanic	
Hawaiian Native/Pacific Islander Male Hispanic	
Hawaiian Native/Pacific Islander Male Non-Hispanic	
White Female Hispanic	
White Female Non-Hispanic	
White Male Hispanic	
White Male Non-Hispanic	
Total Group	

Census tract(s) _____

Completed By: _____ Date: _____

DSR NO: _____

Section 2I. Required consultation or coordination between the lead agency and/or the RFO and another governmental unit including tribes:

Easements, permissions, or permits:

Mitigation Description:

Agencies, persons, and references consulted, or to be consulted:

DSR NO: _____

Section 3 Engineering Cost Estimate

Completed By: _____ Date: _____

This section must be completed by each alternative considered (attach additional sheets as necessary).

Proposed Recovery Measure (including mitigation)	Quantity	Units	Unit Cost (\$)	Amount (\$)
Total Installation Cost (Enter in Section 1F)\$				

Unit Abbreviations:

AC	Acre	LS	Lump Sum
CY	Cubic Yard	SF	Square Feet
EA	Each	SY	Square Yard
HR	Hour	TN	Ton
LF	Linear Feet		Other (Specify)

DSR NO: _____

Section 4 NRCS EWP Funding Priority

Complete the following section to compute the funding priority for the recovery measures in this application (see instructions on page 10).

Priority Ranking Criteria	Yes	No		Ranking Number Plus Modifier
1. Is this an exigency situation?				
2. Is this a site where there is serious, but not immediate threat to human life?				
3. Is this a site where buildings, utilities, or other important infrastructure components are threatened?				
4. Is this site a funding priority established by the NRCS Chief?				
The following are modifiers for the above criteria			Modifier	
a. Will the proposed action or alternatives protect or conserve federally-listed threatened and endangered species or critical habitat?				
b. Will the proposed action or alternatives protect or conserve cultural sites listed on the National Register of Historic Places?				
c. Will the proposed action or alternatives protect or conserve prime or important farmland?				
d. Will the proposed action or alternatives protect or conserve existing wetlands?				
e. Will the proposed action or alternatives maintain or improve current water quality conditions?				
f. Will the proposed action or alternatives protect or conserve unique habitat, including but not limited to, areas inhabited by State-listed species, fish and wildlife management area, or State identified sensitive habitats?				

Enter priority computation in Section 1A, NRCS Entry, Funding priority number.

Remarks:

DSR NO: _____

Section 5A Findings

Finding: Indicate the preferred alternative from Section 2 (Enter to Section 1E):

I have considered the effects of the action and the alternatives on the Environmental Economic, Social; the Special Environmental Concerns; and the extraordinary circumstances (40 CFR 1508.27). I find for the reasons stated below, that the preferred alternative:

_____ Has been sufficiently analyzed in the EWP PEIS (reference all that apply)

Chapter _____

Chapter _____

Chapter _____

Chapter _____

Chapter _____

_____ May require the preparation of an environmental assessment or environmental impact statement.

The action will be referred to the NRCS State Office on this date:

NRCS representative of the DSR team

Title: _____ Date: _____

Section 5B Comments:

Section 5C

Sponsor Concurrence:

Sponsor Representative

Title: _____ Date: _____

Section 6 Attachments:

A. Location Map

B. Site Plan or Sketches

C. Other (explain)

DSR NO: 103-05-058K

Section 5A Findings

Finding: Indicate the preferred alternative from Section 2 (Enter to Section 1E):

Removal of Storm debris from channel by conventional methods.

I have considered the effects of the action and the alternatives on the Environmental Economic, Social; the Special Environmental Concerns; and the extraordinary circumstances (40 CFR 1508.27). I find for the reasons stated below, that the preferred alternative:

- ☒ Has been sufficiently analyzed in the EWP PEIS (reference all that apply)
- Chapter 5.2.2.1.2
- Chapter 5.2.2.2.2
- Chapter
- Chapter
- Chapter

May require the preparation of an environmental assessment or environmental impact statement.
The action will be referred to the NRCS State Office on this date:

NRCS representative of the DSR team

Title: District Conservationist

Date: 11/30/2005

Section 5B Comments:

Section 5C

Sponsor Concurrence:

Sponsor Representative

Title: STP DRAINAGE ENGINEER

Date: 11/30/2005

Section 6 Attachments:

- A. Location Map
- B. Site Plan or Sketches
- C. Other (explain)

SITE MAP
DSR 103-05-058K
ST. TAMMANY PARISH

BLACK RIVER REACH #1

EST LENGTH NORTH OF LA22: 6,200'
EST. LENTH SOUTH OF LA22: 2,200'
TOTAL EST. LENGTH: 8,800'

